

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**JOHN JAMES FOR SENATE, INC.**

Full Name (Last, First, Middle Initial)

**FARMER, STAN, , ,**

**A.**

Mailing Address PO BOX 7643

City

HORSESHOE BAY

State

TX

Zip Code

78657

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CITY

Occupation

MANAGER

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 12 2020

Transaction ID : SA11AI.460316

Amount of Each Receipt this Period

25.00

☐ Memo Item

EARMARKED THROUGH WINRED [SA11AI.440754]

Full Name (Last, First, Middle Initial)

**FARNSWORTH, ANITA, , ,**

**B.**

Mailing Address 460 SOUTH GREENFIELD ROAD  
#2

City

MESA

State

AZ

Zip Code

85206

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 09 2020

Transaction ID : SA11AI.449734

Amount of Each Receipt this Period

2800.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**FARRELL, INGRID, , ,**

**C.**

Mailing Address 1260 E PINE RIVER RD

City

MIDLAND

State

MI

Zip Code

48640

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MIDMICHIGANMEDICAL CENTER MIDLAND M

Occupation

RN

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

465.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 08 2020

Transaction ID : SA11AI.447888

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

2850.00